OFFICE OF LOCAL BUSINESS DEVELOPMENT



Contract

RECERTIFICATION APPLICATION

		Disadvantaged B Local Business E Small Business E Enterprise Zone Resident Busines	Interprise	2	
Business Enterprise					
Address					
City, State, Zip Code					
Contact Name/Title					
Telephone/Fax					
Email/Website					
Company's gross rec	eipts for	the last three years	::		
Year Ending					
Gross Receipts					
List the three largest	contracts	s performed by the	company in the la	ast three years	s:

Date Completed

Prime/Sub Contractor

Dollar Amount

List the number of employees:

Full-Time	Part-Time	DC Resident(s)	Non-DC Resident(s)

SINCE THE DATE OF YOUR LAST CERTIFICATION/RECERTIFICATION			No
1	Did the legal structure of the business enterprise change?		
2	2 Did your business enterprise move?		
3	Have the officers of the business enterprise changed?		
4	Have there been any changes in the business enterprise's stock shares?		
5	Have there been any changes in the ownership or control of the business enterprise?		
6	Have there been any changes in the products or services offered?		
7	Have there been any stock transfer agreements?		
8	Have there been any third party agreements?		
9	Have there been profit sharing agreements?		
10	0 Is your business enterprise in Good Standing with the Office of Tax and Revenue?		
11	1 Is your business enterprise in Good Standing with the Department of Consumer &		
	Regulatory Affairs (DCRA)?		

If <u>YES</u> is checked for any of the above questions (except #10 and #11), please submit documentation and/or amendments regarding the change(s). All questions must be answered.

	DOCUMENTATION REQUIRED		
1	Copy of current business, professional and/or trade license(s) (if applicable).		
2	2 District and Federal tax returns, including all schedules for the past two years (signed).		
3	Form UC-30 (Employer's Quarterly Contribution and Wage Report) most recent, if applicable.		
4	Lease or deed for the business site.		
5	Current financial statement (90 days).		
6	If re-applying for DBE, you must submit a letter with the DBE form demonstrating that you are		
	socially and economically disadvantaged along with your most recent personal tax returns(signed).		
	Please review Disadvantaged Checklist for details.		
7	Certificate of Good Standing(s) from the Office of Tax & Revenue <i>and</i> Department of Consumer		
	and Regulatory Affairs.		